

## **ARRA 1512 Report Approval Record**

State Agency \_\_\_\_\_

Award Name and SAI Number \_\_\_\_\_

By signing below, I have verified and ensured the accuracy and completeness of my agency's 1512 report submission for this award.

Questions regarding the 1512 submission should be directed to \_\_\_\_\_, and can be reached at 302-\_\_\_\_\_-\_\_\_\_\_.

Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

[Please scan in and email this signed document, along with a copy of your 1512 spreadsheet, to OMB\_ARRA1512@state.de.us.]